



# MALINGERING

## CAPT WEAR

### Psychiatry Department

### NOMI

# Learning Objectives

- ◆ Understand the definition of malingering
- ◆ Differentiate malingering from similar disorders
- ◆ Understand the role of the flight surgeon in making recommendations for disposition

# MALINGERING

The intentional production of false or grossly exaggerated physical or psychological symptoms, motivated by external incentives.

# Examples of Incentives

- ◆ avoiding work
- ◆ obtaining financial compensation
- ◆ avoiding military duty
- ◆ evading criminal prosecution
- ◆ obtaining drugs
- ◆ *may be adaptive (POW)*

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# Malingering vs. Factitious Disorder

**In malingering, the motivation for symptom production is an external incentive whereas in factitious disorder the external incentive is absent. In factitious disorder, there is a need to maintain the sick role. This is also known as Munchausen's Disease.**

# Malingering vs Other

What differentiates malingering from Conversion Disorder and other Somatoform Disorders is the ***intentional*** production of symptoms.

# Great Malingerers

- ◆ Ulysses

- ◆ Eddie Murphy



**Simulation:**  
“faking bad”

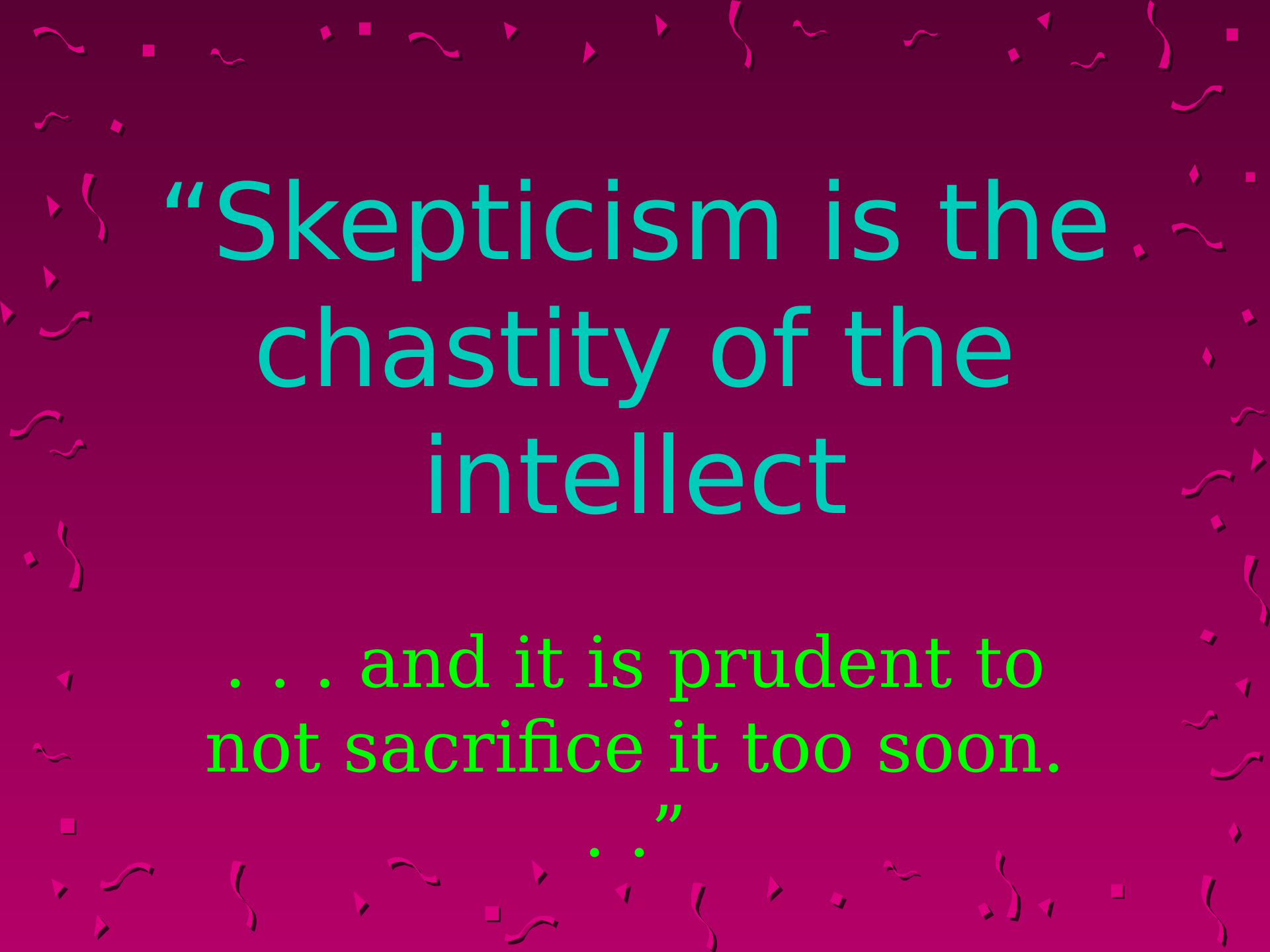
**Dissimulation:**  
“faking good”

# Suspect Malingering if:

- ◆ Medicolegal context (referred by an attorney)
- ◆ Marked discrepancy between the person's claimed stress or disability and the objective findings
- ◆ Lack of cooperation during the diagnostic evaluation and in complying with the prescribed treatment
- ◆ The presence of Antisocial PD

# Your Role

- ◆ Be aware of your own feelings (angry, betrayed)
- ◆ Don't Rx with drugs for vague complaints
- ◆ It **IS NOT** your job to diagnose malingering:  
You can always state something like: ***“I am unable to find a clear underlying physiologic cause for the symptoms. . .”***  
or, ***“I cannot find objective substantiation for the stated symptoms . . .”***



“Skepticism is the  
chastity of the  
intellect

. . . and it is prudent to  
not sacrifice it too soon.

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